Application Data Sh et

Application Information

Application Type:: Regular

Subject Matter:: Utility

Suggested Group Art Unit:: N/A

CD-ROM or CD-R?:: None

Sequence submission?:: None

Computer Readable Form (CRF)?:: No

Title:: HUMERAL NAIL

Attorney Docket Number:: TRAUMA 3.0-435

Request for Early Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure:: 1

Total Drawing Sheets:: 1

Small Entity?:: No

Petition included?:: No

Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Sweden

Status:: Full Capacity

Given Name:: Carl

Family Name:: Ekholm

City of Residence:: Onsala

Country of Residence:: Sweden

Street of mailing address:: Stora Enens Vag 7

City of mailing address:: Onsala

Country of mailing address:: Sweden

Postal or Zip Code of mailing address:: S-43931

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Sweden

Status:: Full Capacity

Given Name:: Anders
Family Name:: Jonsson
City of Residence:: Onsala
Country of Residence:: Sweden

Street of mailing address:: Fyrmastarevagen 20

City of mailing address::

Country of mailing address::

Sweden

Postal or Zip Code of mailing address::

S-43994

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Germany

Status:: Full Capacity

Given Name:: Nils

Family Name:: Zander

City of Residence:: Eckernförde
Country of Residence:: Germany

Street of mailing address:: Geschwister-Scholl-Strasse 99

City of mailing address:: Eckernförde
Country of mailing address:: Germany
Postal or Zip Code of mailing address:: D-24340

Correspondence Information

Correspondence Customer Number:: 000530

Representative Information

Representative Customer Number:: 000530

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Foreign Priority Information

Country::	Application number::	FilingDate::	Priority Claimed::
Germany	20213166.1	08/28/02	Yes

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